

<i>SERFF Tracking Number:</i>	<i>KCLF-125812773</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Old American Insurance Company</i>	<i>State Tracking Number:</i>	<i>40376</i>
<i>Company Tracking Number:</i>	<i>R8187</i>		
<i>TOI:</i>	<i>L07I Individual Life - Whole</i>	<i>Sub-TOI:</i>	<i>L07I.101 Fixed/Indeterminate Premium - Single Life</i>
<i>Product Name:</i>	<i>R8187</i>		
<i>Project Name/Number:</i>	<i>R8187/R8187</i>		

Filing at a Glance

Company: Old American Insurance Company

Product Name: R8187

TOI: L07I Individual Life - Whole

Sub-TOI: L07I.101 Fixed/Indeterminate

Premium - Single Life

Filing Type: Form

SERFF Tr Num: KCLF-125812773

SERFF Status: Closed

Co Tr Num: R8187

Co Status:

Author: Jason Ankenman

Date Submitted: 09/24/2008

State: ArkansasLH

State Tr Num: 40376

State Status: Approved-Closed

Reviewer(s): Linda Bird

Disposition Date: 10/07/2008

Disposition Status: Approved

Implementation Date:

Implementation Date Requested: On Approval

State Filing Description:

General Information

Project Name: R8187

Project Number: R8187

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 10/07/2008

State Status Changed: 10/07/2008

Corresponding Filing Tracking Number:

Filing Description:

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Deemer Date:

Enclosed for your consideration and approval is a copy of the above referenced rider. This is a new form and will not replace or supersede any previously approved forms.

Rider R8187 is a Children's Term Insurance Rider. The amount of insurance is the same for each Insured Child covered under this rider. It cannot exceed the amount of insurance the Insured has under the policy it is attached to. This rider will be used with Old American's life insurance policies.

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<i>Company Tracking Number:</i>	<i>R8187</i>		
<i>TOI:</i>	<i>L071 Individual Life - Whole</i>	<i>Sub-TOI:</i>	<i>L071.101 Fixed/Indeterminate Premium - Single Life</i>
<i>Product Name:</i>	<i>R8187</i>		
<i>Project Name/Number:</i>	<i>R8187/R8187</i>		

If you require any additional information, please contact me at 800-821-6164 ext 8706, email address jankenman@kclife.com.

Company and Contact

Filing Contact Information

Jason Ankenman, Variable Compliance Coordinator	jankenman@kclife.com
P O Box 219139	(800) 821-6164 [Phone]
Kansas City , MO 64121	(816) 753-3018[FAX]

Filing Company Information

Old American Insurance Company	CoCode: 67199	State of Domicile: Missouri
3520 Broadway	Group Code: 588	Company Type: Life and Health
PO Box 218573		
Kansas City, MO 64121-8573	Group Name:	State ID Number:
(816) 753-4900 ext. [Phone]	FEIN Number: 44-0376695	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	Yes
Fee Explanation:	
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Old American Insurance Company	\$50.00	09/24/2008	22695511

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<i>Product Name:</i>	<i>R8187</i>		
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Linda Bird	10/07/2008	10/07/2008

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<i>Product Name:</i>	<i>R8187</i>		
<i>Project Name/Number:</i>	<i>R8187/R8187</i>		

Disposition

Disposition Date: 10/07/2008

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>KCLF-125812773</i>	<i>State:</i>	<i>Arkansas</i>
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Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice		Yes
Supporting Document	Application		Yes
Supporting Document	Life & Annuity - Acturial Memo		No
Form	Children's Term Insurance Rider		Yes

<i>SERFF Tracking Number:</i>	<i>KCLF-125812773</i>	<i>State:</i>	<i>Arkansas</i>
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Form Schedule

Lead Form Number: R8187

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	R8187	Policy/Cont	Children's Term ract/Fratern Insurance Rider al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		54	R8187.pdf



OLD AMERICAN INSURANCE COMPANY

Children's Term Insurance Rider

The Benefit

Old American Insurance Company will pay the children's face amount to the beneficiary under this rider upon receiving proof that the death of any Insured Child occurred:

- (1) after the Insured Child became 15 days old;
- (2) before the policy anniversary on which the Insured Child is 25;
- (3) on or before the rider expiration date; and
- (4) while this rider is in force.

No coverage will be provided on a child prior to 15 days of age.

Definition of Insured Child

An Insured Child is:

- (1) any natural born child, legally adopted child, or stepchild who is living with the Insured, or any grandchild of the Insured, if the Insured is acting permanently in a parental capacity; and
- (2) any child of the Insured who is at least 15 days and under 21 years old as of the rider effective date.

All covered children must be named in the application and accepted by us.

Any child born to or legally adopted by the Insured after the rider effective date becomes an Insured Child after written notice to us during the life of the child.

Children's Face Amount

The amount of insurance coverage on each Insured Child is shown in Section 1, Policy Data.

Paid-up Insurance Benefit

If the Insured dies while the policy and this rider are in force (other than by suicide during the first two policy years), this rider will become fully paid-up and will continue in force to the rider expiration date

without payment of any further premium. The paid-up insurance has a cash value but will have no loan value.

You may surrender the paid-up insurance any time for its cash value. The cash value within 30 days after a policy anniversary will be computed as of such anniversary. We may defer payment for up to six months from the date surrender is requested. You must request cash surrender in writing.

The cash value of each Insured Child's paid-up insurance is the net single premium for the future guaranteed benefits based on the 2001 Commissioner's Standard Ordinary Mortality Table and the nonforfeiture interest rate shown in Section 1, Policy Data. For this calculation we assume that each Insured Child's death benefits are payable at the end of the policy year of death.

Ownership

Unless otherwise provided, the owner of this rider will be the owner of the policy.

Beneficiary

Any amount payable upon the death of any Insured Child will be paid, unless otherwise provided, to the owner of this rider, if living, otherwise to the owner's estate or legal successors.

Suicide

If the Insured dies by suicide, while sane or insane, within two years of the effective date of this rider, the amount payable by us will be a sum equal to the premiums paid for this rider.

If this rider terminates because of the Insured's death by suicide, the remaining Insured Children have 31 days in which to convert the insurance on their lives according to the terms of the Conversion Provision.

Incontestability

We will not contest this rider after it has been in force during the lifetime of any Insured Child for two years from the rider effective date.

Misstatement of Age

If the age of the Insured has been misstated, the termination date of this rider will be determined according to the correct age of the Insured. If the age of any Insured Child has been misstated, the termination date for such child's insurance will be determined according to the child's correct age.

Conversion of Children's Term Rider

While this rider is in force, you may convert any Insured Child's insurance to a new individual life insurance policy. Proof of good health satisfactory to us will be required only if the new policy is to be issued with accidental death or waiver of premium riders. You must submit written request for conversion to us before the earliest of:

- (1) the policy anniversary following the Insured's 70th birthday;
- (2) the policy anniversary date nearest the Insured Child's 25th birthday; or
- (3) 31 days after the expiration date.

New Individual Life Insurance Policy

The new policy will be issued as follows:

- (1) the underwriting classification will be the same as that of the Insured Child under this rider;
- (2) the policy will be issued at the insuring age of the Insured Child as of the effective date of conversion;
- (3) the policy will be an individual life insurance policy we are then issuing for the then insuring age of the Insured Child; and
- (4) the premium rate will be the rate then charged by us for that class, plan, age and sex.

You may choose as the face amount of the new life policy an amount which:

- (1) does not exceed the amount of insurance on the Insured Child under this rider;
- (2) is not less than the minimum we issue on the plan selected; and
- (3) does not exceed the maximum we then issue on the plan selected.

Any insurance under this rider which is converted to a new policy will terminate at the time the new policy takes effect.

The time period of the Suicide and Incontestability provisions of any new policy will begin on the effective date of this rider.

Temporary Insurance

If an Insured Child dies during the 31-day period after the expiration date and before applying for conversion, we will pay a death benefit. The death benefit will be equal to the children's face amount.

Premiums for this Rider

Premiums for this rider are payable with the premiums for the policy. Premiums are payable until this rider terminates. The premium for this rider is shown in Section 1, Policy Data.

Reinstatement of this Rider

This rider may be reinstated only if the policy coverage of the Insured is in force or is reinstated with this rider.

General Provisions

The following provisions apply to this rider:

- (1) this rider is made a part of the policy to which it is attached;
- (2) this term insurance is subject to all the provisions of this rider and the applicable policy provisions;
- (3) the effective date of this rider is the same as that of the policy unless this rider is added at a later date. The effective date of this rider will then be specified in the rider description shown in Section 1, Policy Data;
- (4) this rider does not provide for cash or loan values except as provided in the Paid-up Insurance Benefit provision in this rider; and
- (5) the expiration date of this rider is the policy anniversary following the Insured's 70th birthday.

Cancellation

This rider may be canceled by you at any time. The cancellation will be effective on the monthly anniversary day following receipt of your request. Your request must be in writing and filed with us prior to this date. We may require that the policy be submitted for endorsement to show the cancellation. If this rider is canceled, the premium for the policy will be reduced in the amount of the premium charged for this rider.

Termination of Rider

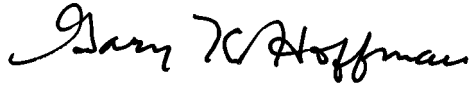
This rider terminates on the earliest of:

- (1) the date the policy terminates for any reason;

- (2) the date this rider is canceled by you;
- (3) the date any premium for this rider or the policy is in default beyond the end of its grace period;
- (4) the date on which any guaranteed value option in the policy becomes effective; or
- (5) the expiration date of this rider.

If this rider has not previously terminated, the insurance on any Insured Child will terminate on the policy anniversary nearest the Insured Child's 25th birthday.

Signed at Old American Insurance Company, a legal reserve stock company, at its Home Office, 3520 Broadway, P.O. Box 218573, Kansas City, Missouri 64121-8573.



Secretary



President

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Rate Information

Rate data does NOT apply to filing.

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Supporting Document Schedules

Review Status:

Satisfied -Name: Certification/Notice

09/11/2008

Comments:

Attachments:

Regulation 19 Cert (Discrimination).pdf

Readability Certification.pdf

Review Status:

Satisfied -Name: Application

09/11/2008

Comments:

We will be using application form number A2885-A which was approved by your department on 4/6/2007

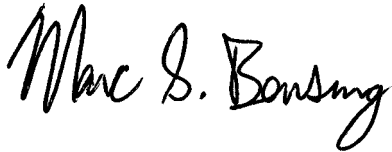
**STATE OF ARKANSAS
COMPLIANCE CERTIFICATION**

COMPANY NAME: Old American Insurance Company

FORM TITLE(S): Children's Term Insurance Rider

FORM NUMBER(S): R8187

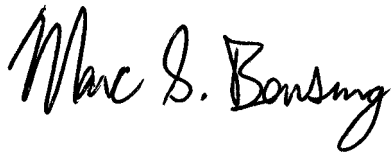
I hereby certify that to the best of my knowledge and belief, the above form and submission is in compliance with Regulation 19, as well as the other laws, rules and regulations of the State of Arkansas.

A handwritten signature in black ink, reading "Marc S. Bensing". The signature is written in a cursive style with a horizontal line underneath it.

Marc S. Bensing
Assistant Vice President
September 22, 2008

READABILITY CERTIFICATION

Form	Flesch Score
R8187	53.7



Name: Marc S. Bensing

Title: Assistant Vice President

Company: Old American Insurance Company

Date: September 22, 2008